



LOS ANGELES COUNTY – DEPARTMENT OF HEALTH SERVICES  
COMMUNITY PARTNERS  
MY HEALTH LA

**AFFIDAVIT**

STATE OF CALIFORNIA }  
COUNTY OF LOS ANGELES } ss.

Application ID: <App Id#>

Member ID: <Member ID#>

I, Alice Bluegown, living at  
323 Fantasy Lane, Los Angeles County  
California, certify through my signature that the statement given below is true and correct to the best of  
my knowledge and belief: I am employed by Hanna Harribal, who lives at 252 Shell Rd.,  
as a house cleaner. She refuses to give me a statement verifying how much she pays  
me. I work 4 hours a day, 3 times a week. I am paid \$75.00 a week, on every Friday, in  
cash. On 11-24, 11-17, 11-10 and 11-3, she gave me \$75.00 cash.

**SIGNATURE** Alice Bluegown

*ANY PERSON WHO SIGNS THIS STATEMENT AND WHO WILFULLY STATES AS TRUE ANY MATERIAL  
MATTER WHICH HE KNOWS TO BE FALSE IS SUBJECT TO THE PENALTIES PRESCRIBED FOR PERJURY  
IN THE PENAL CODE BY THE STATE OF CALIFORNIA, SEC 11054 OF THE W. & I. CODE.*

<Assistor's Name>  
WITNESSED AND VERIFIED BY

<Assistor's Title>  
TITLE

<Day>, <Date>  
DATE



STATE OF CALIFORNIA }  
COUNTY OF LOS ANGELES } ss.

Member ID:

I, \_\_\_\_\_, living at \_\_\_\_\_, Los Angeles County California, certify through my signature that the statement given below is true and correct to the best of my knowledge and belief: \_\_\_\_\_

ANY PERSON WHO SIGNS THIS STATEMENT AND WHO WILFULLY STATES AS TRUE ANY MATERIAL MATTER WHICH HE KNOWS TO BE FALSE IS SUBJECT TO THE PENALTIES PRESCRIBED FOR PERJURY IN THE PENAL CODE BY THE STATE OF CALIFORNIA, SEC 11054 OF THE W. & I. CODE.

DATE \_\_\_\_\_

76A303 PA 853 (Rev. 11/72)